

07-17-00

ATTORNEY DOCKET NO.: P-4824.06 con
Express Mail EL084630860US

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE
UTILITY PATENT APPLICATION TRANSMITTAL

PATENT
Total Pages _____

07/14/00

07/14/00
JCS682 U.S. PTO

NAMED INVENTOR OR APPLICATION IDENTIFIER: **DAVID D. VERNES, GEORGE M. HUEPENBECKER, DALE A. WAHLSTROM**
MEDICAL ELECTRICAL LEAD

CERTIFICATE UNDER 37 CFR §1.10: I hereby certify that this Utility Patent Application Transmittal and the documents referred to as enclosed therein are being deposited with the United States Postal Service, in an envelope addressed to: Box Patent Application, Assistant Commissioner of Patents, Washington, D.C. 20231, "EXPRESS No. EL084630860, on this 14th day of July, 2000.

FRAYDA M. NITSCHKE

Printed Name

Signature

JCS682 U.S. PTO
09/616592

07/14/00

Assistant Commissioner for Patents
BOX PATENT APPLICATION
Commissioner of Patents and Trademarks
Washington, D.C. 20231

Sir:

We are transmitting herewith the attached:

X **Patent Application Transmittal**

X **Specification:**

Total pages: 20 (including claims and abstract: Spec. 15 sheets; Claims 4 sheets; Abstract - 1

X **Drawings:**

Total sheets: 10

☐ formal ☒ informal

X **Combined Declaration and Power of Attorney:**

☐ newly executed

X ☐ copy from prior application

☐ Deletion of Inventor(s) - Signed statement attached deleting inventor(s) named in the prior application (37 CFR 1.63(d)(2) and 1.33(b))

X ☐ Incorporation by Reference - *The entire disclosure of the prior application, from which a copy of the oath or declaration is supplied above is considered as being part of the disclosure of the accompanying application and is hereby incorporated by reference therein.*

Accompanying application parts:

X ☐ Notification of filing a CONTINUATION APPLICATION

X ☐ ASSOCIATE POWER OF ATTORNEY

☐ Assignment of the Invention to Medtronic, Inc.

☐ Assignment cover sheet

☐ Information Disclosure Statement

☐ PTO Form 1449

☐ Copies of IDS citations

☐ Preliminary Amendment

☐ A copy of the Petition or Conditional Petition for Extension of Time in the prior application.

X ☐ Return Postcard

IF A CONTINUING APPLICATION:

X ☐ Continuation

☐ Divisional

☐ Continuation-in-part (CIP)

of prior application No. 09 / 482,775 FILED JANUARY 13, 2000 WHICH IS A DIVISIONAL

APPLICATION OF U.S. PATENT NO. 6,061,598 GRANTED MAY 9, 2000, WHICH IS A DIVISIONAL OF U.S. PATENT 6,018,683 GRANTED JANUARY 25, 2000, WHICH IS A DIVISIONAL APPLICATION OF APPLICATION 08/843,763 FILED APRIL 21, 1997.

X

Amend the specification by inserting before the first line the sentence:
CONTINUATION

now USPN 6,119,042 Ser. No. 09/247,324, 02/10/99, now
of prior application No. 09 / 482,775 FILED JANUARY 13, 2000 WHICH IS A DIVISIONAL APPLICATION OF U.S. PATENT NO. 6,061,598 GRANTED MAY 9, 2000, WHICH IS A DIVISIONAL OF U.S. PATENT 6,018,683 GRANTED JANUARY 25, 2000, WHICH IS A DIVISIONAL APPLICATION OF APPLICATION 08/843,763 FILED APRIL 21, 1997.

☐

Cancel in this application original claims _____ of the prior application before calculating the filing fee.
(At least the original independent claim must be retained for filing purposes.)

X

The prior application is assigned of record to Medtronic, Inc.

X

The Power of Attorney in the prior application is to: GIRMA WOLDE-MICHAEL

Ser. No. 09/070171, 04/30/98, now

24

aa

☐ This application claims the benefit of U.S. Provisional Application(s) Serial No.(s) _____, filed _____.

☒ Address all future correspondence to: GIRMA WOLDE-MICHAEL, Reg. No. 36,724
Medtronic, Inc., MS 301
7000 Central Avenue NE
Minneapolis, Minnesota 55432
phone: (763)514-6402

FEE CALCULATION	No. of Claims Filed	Claims Included in Base Fee	No. of Extra Claims	Rate	Fee
Total Claims	37	20	= 17	x 18	306
Independent Claims	1	3	= 0	x 78	0
Multiple Dependent Claims	YES			+ 260	260
Basic Filing Fee					\$ 760
TOTAL					1,326

Charge Deposit Account No. 13-2546 the sum of \$1,326.00 (Filing Fee) for a total of **\$1,326.00.**

The Commissioner is hereby authorized to charge any fees which may be required under 37 CFR 1.16 and 1.17, or credit any overpayment to Deposit Account No. 13-2546.. A duplicate of this transmittal is enclosed.

07/14/2000
Date


GIRMA WOLDE-MICHAEL Reg. No.36,724
MEDTRONIC, INC.
7000 Central Avenue N.E.
Minneapolis, Minnesota 55432
Telephone: (763) 514- 6402

0041656 07/14/2000

Qa